effects upon the child's mental life will ensue. I have earlier referred to the established fact that the most serious disturbances in mental life are undoubtedly associated with severe deprivations in the suckling period. If the child is deprived of the normal satisfaction of nutritional impulses or of associated libidinal wishes in the oral period, it is doubtful whether his mental life ever entirely recovers. Psychoanalytic studies again, therefore, reinforce the wisdom of normal breast feeding in the early months (especially the first two or three months), and of a regular, settled feeding routine.

Even in the suckling stage, however, the human mind has some measure of resilience and adaptability. Most children can adapt themselves and their libidinal demands, even to the long intervals between feeding which nowadays have been set up as the standard by dieticians and physiologists, only provided these are regular and stable. There are children, it is true, who cannot accept these long intervals, just as there are individual children who from the outset are difficult feeders, this probably being the outcome of a constitutional enhancement of oral sadism and resulting anxieties. But in general, the ordinary infant can and does learn to adapt to a normal, ordered life of regular satisfaction.

It is, however, extremely important that the libidinal factors in the feeding situation should be recognised. Where, for example, the mother cannot feed her child satisfactorily at the breast, whether for physiological or psychological reasons, it is important that the bottle should be given in such a way as to minimise the libidinal loss to the child. The manner in which he is held while feeding from the bottle will, for example, make a great difference to his

general satisfaction. It is not only food he requires, but also love.

It will, moreover, be clear that the crisis of weaning is an enormously important event in the child's love life, as well as in his physiological adaptation to diet. Fortunately, it has not escaped observation by ordinary doctors, mothers and nurses that a sudden or dramatic weaning has serious effects upon the child's behaviour. Ordinary sense, even without the deeper knowledge of what the weaning situation means to the child himself, has sufficed to build up general standards and methods which on the whole are satisfactory. The modern practice of accustoming the child to drink water from a spoon from his earliest weeks, so that this becomes